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B22C (Official Form 22C) (Chapter 13) (01/08)

Richard Anthony Mier In re Jeannie Gay Mier	According to the calculations required by this statement: The applicable commitment period is 3 years.
Case Number: Debtor(s) 09-25863 (If known)	 ■ The applicable commitment period is 5 years. ■ Disposable income is determined under § 1325(b)(3). □ Disposable income is not determined under § 1325(b)(3).
	(Check the boxes as directed in Lines 17 and 23 of this statement.)

CHAPTER 13 STATEMENT OF CURRENT MONTHLY INCOME AND CALCULATION OF COMMITMENT PERIOD AND DISPOSABLE INCOME

In addition to Schedules I and J, this statement must be completed by every individual chapter 13 debtor, whether or not filing jointly. Joint debtors may complete one statement only.

	Part I. REPORT OF INCOME				
1	Marital/filing status. Check the box that applies and complete the balance of this part of this state a. □ Unmarried. Complete only Column A ("Debtor's Income") for Lines 2-10. b. ■ Married. Complete both Column A ("Debtor's Income") and Column B ("Spouse's Income")				
	All figures must reflect average monthly income received from all sources, derived during the six calendar months prior to filing the bankruptcy case, ending on the last day of the month before the filing. If the amount of monthly income varied during the six months, you must divide the six-month total by six, and enter the result on the appropriate line.			Column B Spouse's Income	
2	Gross wages, salary, tips, bonuses, overtime, commissions.			\$	2,435.71
3	Income from the operation of a business, profession, or farm. Subtract Line b from Line a and enter the difference in the appropriate column(s) of Line 3. If you operate more than one business, profession or farm, enter aggregate numbers and provide details on an attachment. Do not enter a number less than zero. Do not include any part of the business expenses entered on Line b as a deduction in Part IV. Debtor Spouse		·		
	a. Gross receipts \$ 0.00 \$ 0.00				
	b. Ordinary and necessary business expenses \$ 0.00 \$ 0.00				
	c. Business income Subtract Line b from Line a	\$	0.00	\$	0.00
4	Rents and other real property income. Subtract Line b from Line a and enter the difference in the appropriate column(s) of Line 4. Do not enter a number less than zero. Do not include any part of the operating expenses entered on Line b as a deduction in Part IV. Debtor Spouse a. Gross receipts \$ 0.00 \$ 0.00				
	b. Ordinary and necessary operating expenses \$ 0.00 \$ 0.00				
	c. Rent and other real property income Subtract Line b from Line a	\$	0.00	\$	0.00
5	Interest, dividends, and royalties.	\$	0.00	\$	0.00
6	Pension and retirement income.	\$	0.00	\$	0.00
7	Any amounts paid by another person or entity, on a regular basis, for the household expenses of the debtor or the debtor's dependents, including child support paid for that purpose. Do not include alimony or separate maintenance payments or amounts paid by the debtor's spouse.	\$	0.00	\$	0.00
8	Unemployment compensation. Enter the amount in the appropriate column(s) of Line 8. However, if you contend that unemployment compensation received by you or your spouse was a benefit under the Social Security Act, do not list the amount of such compensation in Column A or B, but instead state the amount in the space below:				
	Unemployment compensation claimed to be a benefit under the Social Security Act Debtor \$ 0.00 Spouse \$ 0.00	\$	0.00	\$	0.00

Income from all other sources. Specify source and amount. If necessary, list additional sources

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	on a separate page. Total and enter on Line 9. maintenance payments paid by your spouse, separate maintenance. Do not include any b payments received as a victim of a war crime,	but include all other enefits received under t	payments of alimony the Social Security Ac			
9	international or domestic terrorism.		, or as a vicuili of			
	a.	Debtor \$	Spouse \$			
	b.	\$	\$	\$ 0.	00 \$	0.00
10	Subtotal. Add Lines 2 thru 9 in Column A, an in Column B. Enter the total(s).			ough 9 \$ 5,081.		2,435.71
11	Total. If Column B has been completed, add I the total. If Column B has not been completed			d enter \$		7,516.96
	Part II. CALCULAT			ENT PERIOD		
12	Enter the amount from Line 11				\$	7,516.96
13	Marital Adjustment. If you are married, but a calculation of the commitment period under § enter on Line 13 the amount of the income list the household expenses of you or your depend income (such as payment of the spouse's tax li debtor's dependents) and the amount of incom on a separate page. If the conditions for entering a. b. c.	1325(b)(4) does not reced in Line 10, Column lents and specify, in the ability or the spouse's see devoted to each purpose.	quire inclusion of the B that was NOT paid lines below, the basis upport of persons otherse. If necessary, list a	income of your spouse, on a regular basis for for excluding this er than the debtor or the		
	Total and enter on Line 13	1.			\$	0.00
14	Subtract Line 13 from Line 12 and enter the	e result.			\$	7,516.96
15	Annualized current monthly income for § 13 enter the result.	325(b)(4). Multiply the	e amount from Line 14	by the number 12 and	\$	90,203.52
16	Applicable median family income. Enter the information is available by family size at www.					
	a. Enter debtor's state of residence:	NV b. Enter	debtor's household siz	e: 4	\$	74,735.00
	Application of § 1325(b)(4). Check the application	cable box and proceed a	as directed.			
17	☐ The amount on Line 15 is less than the art top of page 1 of this statement and continu		eck the box for "The a	pplicable commitment p	eriod is	3 years" at the
	■ The amount on Line 15 is not less than the at the top of page 1 of this statement and c			he applicable commitme	ent perio	od is 5 years"
	Part III. APPLICATION OF	§ 1325(b)(3) FOR DE	ETERMINING DISP	OSABLE INCOME	ī	
18	Enter the amount from Line 11.				\$	7,516.96
19	Marital Adjustment. If you are married, but a any income listed in Line 10, Column B that we debtor or the debtor's dependents. Specify in the payment of the spouse's tax liability or the spot dependents) and the amount of income devote separate page. If the conditions for entering the b. a. b. c.	was NOT paid on a regu the lines below the basis use's support of person d to each purpose. If ne	tlar basis for the house of for excluding the Col s other than the debtor ecessary, list additional	chold expenses of the lumn B income(such as or the debtor's		
	Total and enter on Line 19.				\$	0.00
20	Current monthly income for § 1325(b)(3). S	ubtract Line 19 from Li	ine 18 and enter the re	sult.	\$	7,516.96

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			I		
21	Annualized current monthly income for § 1325(b)(3). Multiply the amount from enter the result.	\$ 90	0,203.52		
22	Applicable median family income. Enter the amount from Line 16.			4,735.00	
	Application of § 1325(b)(3). Check the applicable box and proceed as directed.				
23	ined under §				
	☐ The amount on Line 21 is not more than the amount on Line 22. Check the 1325(b)(3)" at the top of page 1 of this statement and complete Part VII of the				
	Part IV. CALCULATION OF DEDUCTION	NS FROM INCOME			
	Subpart A: Deductions under Standards of the Intern	nal Revenue Service (IRS)			
24A	National Standards: food, apparel and services, housekeeping supplies, persenter in Line 24A the "Total" amount from IRS National Standards for Allowab applicable household size. (This information is available at www.usdoj.gov/ust/bankruptcy.court .)	le Living Expenses for the	\$	1,370.00	
National Standards: health care. Enter in Line a1 below the amount from IRS National Standards for Out-of-Pocket Health Care for persons under 65 years of age, and in Line a2 the IRS National Standards for Out-of-Pocket Health Care for persons 65 years of age or older. (This information is available at www.usdoj.gov/ust/ or from the clerk of the bankruptcy court.) Enter in Line b1 the number of members of your household who are under 65 years of age, and enter in Line b2 the number of members of your household who are 65 years of age or older. (The total number of household members must be the same as the number stated in Line 16b.) Multiply Line a1 by Line b1 to obtain a total amount for household members under 65, and enter the result in Line c1. Multiply Line a2 by Line b2 to obtain a total amount for household members 65 and older, and enter the result in Line c2. Add Lines c1 and c2 to obtain a total health care amount, and enter the result in Line 24B.					
		65 years of age or older			
	a1. Allowance per member 60 a2. Allowance per m				
	b1. Number of members 4 b2. Number of mem				
	c1. Subtotal 240.00 c2. Subtotal	0.00	\$	240.00	
25A	Local Standards: housing and utilities; non-mortgage expenses. Enter the am Utilities Standards; non-mortgage expenses for the applicable county and housel available at www.usdoj.gov/ust/ or from the clerk of the bankruptcy court).		\$	467.00	
25B	a. IRS Housing and Utilities Standards; mortgage/rent Expense \$ 1,397.00				
	b. Average Monthly Payment for any debts secured by your home, if any, as stated in Line 47 \$	2,782.86			
			\$	0.00	
C. Net mortgage/rental expense Subtract Line b from Line a.				0.00	
			\$	0.00	

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Local Standards: transportation; vehicle operation/public transportation expense. You are entitled to an expense allowance in this category regardless of whether you pay the expenses of operating a vehicle and regardless of whether you use public transportation. Check the number of vehicles for which you pay the operating expenses or for which the operating expenses are included as a contribution to your household expenses in Line 7. \square 0 \square 1 \square 2 or more. 27A If you checked 0, enter on Line 27A the "Public Transportation" amount from IRS Local Standards: Transportation. If you checked 1 or 2 or more, enter on Line 27A the "Operating Costs" amount from IRS Local Standards: Transportation for the applicable number of vehicles in the applicable Metropolitan Statistical Area or Census Region. (These amounts are available at www.usdoj.gov/ust/ or from the clerk of the bankruptcy court.) 211.00 Local Standards: transportation; additional public transportation expense. If you pay the operating expenses for a vehicle and also use public transportation, and you contend that you are entitled to an additional deduction for 27B your public transportation expenses, enter on Line 27B the "Public Transportation" amount from the IRS Local Standards: Transportation. (This amount is available at www.usdoi.gov/ust/ or from the clerk of the bankruptcy 0.00 court.) Local Standards: transportation ownership/lease expense; Vehicle 1. Check the number of vehicles for which you claim an ownership/lease expense. (You may not claim an ownership/lease expense for more than two vehicles.) \blacksquare 1 \square 2 or more. Enter, in Line a below, the "Ownership Costs" for "One Car" from the IRS Local Standards: Transportation (available at www.usdoj.gov/ust/ or from the clerk of the bankruptcy court); enter in Line b the total of the Average 28 Monthly Payments for any debts secured by Vehicle 1, as stated in Line 47; subtract Line b from Line a and enter the result in Line 28. Do not enter an amount less than zero. IRS Transportation Standards, Ownership Costs 489.00 Average Monthly Payment for any debts secured by Vehicle 520.00 1, as stated in Line 47 Net ownership/lease expense for Vehicle 1 Subtract Line b from Line a. 0.00 Local Standards: transportation ownership/lease expense; Vehicle 2. Complete this Line only if you checked the "2 or more" Box in Line 28. Enter, in Line a below, the "Ownership Costs" for "One Car" from the IRS Local Standards: Transportation (available at www.usdoj.gov/ust/ or from the clerk of the bankruptcy court); enter in Line b the total of the Average Monthly Payments for any debts secured by Vehicle 2, as stated in Line 47; subtract Line b from Line a and enter 29 the result in Line 29. Do not enter an amount less than zero. IRS Transportation Standards, Ownership Costs 0.00 Average Monthly Payment for any debts secured by Vehicle 2, as stated in Line 47 0.00 Net ownership/lease expense for Vehicle 2 Subtract Line b from Line a. 0.00 Other Necessary Expenses: taxes. Enter the total average monthly expense that you actually incur for all federal, 30 state, and local taxes, other than real estate and sales taxes, such as income taxes, self employment taxes, social security taxes, and Medicare taxes. Do not include real estate or sales taxes. 1,019.76 Other Necessary Expenses: mandatory deductions for employment. Enter the total average monthly payroll 31 deductions that are required for your employment, such as mandatory retirement contributions, union dues, and uniform costs. Do not include discretionary amounts, such as voluntary 401(k) contributions. 0.00 Other Necessary Expenses: life insurance. Enter total average monthly premiums that you actually pay for term 32 life insurance for yourself. Do not include premiums for insurance on your dependents, for whole life or for any other form of insurance. 0.00 Other Necessary Expenses: court-ordered payments. Enter the total monthly amount that you are required to 33 pay pursuant to the order of a court or administrative agency, such as spousal or child support payments. Do not include payments on past due obligations included in line 49. 0.00 Other Necessary Expenses: education for employment or for a physically or mentally challenged child. Enter the total average monthly amount that you actually expend for education that is a condition of employment and for 34 education that is required for a physically or mentally challenged dependent child for whom no public education providing similar services is available. 0.00 Other Necessary Expenses: childcare. Enter the total average monthly amount that you actually expend on 35 childcare - such as baby-sitting, day care, nursery and preschool. **Do not include other educational payments.** 0.00

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Other Necessary Expenses: health care. Enter the average monthly amount that you actually expend on health care that is required for the health and welfare of yourself or your dependents, that is not reimbursed by insurance 36 or paid by a health savings account, and that is in excess of the amount entered in Line 24B. Do not include payments for health insurance or health savings accounts listed in Line 39. 0.00 Other Necessary Expenses: telecommunication services. Enter the total average monthly amount that you actually pay for telecommunication services other than your basic home telephone and cell phone service - such as 37 pagers, call waiting, caller id, special long distance, or internet service-to the extent necessary for your health and welfare or that of your dependents. Do not include any amount previously deducted. 0.00 38 Total Expenses Allowed under IRS Standards. Enter the total of Lines 24 through 37. 3,307.76 **Subpart B: Additional Living Expense Deductions** Note: Do not include any expenses that you have listed in Lines 24-37 Health Insurance, Disability Insurance, and Health Savings Account Expenses. List the monthly expenses in the categories set out in lines a-c below that are reasonably necessary for yourself, your spouse, or your dependents.. Health Insurance 39 \$ \$ Disability Insurance 0.00 Health Savings Account \$ 0.00 Total and enter on Line 39 0.00 If you do not actually expend this total amount, state your actual total average monthly expenditures in the space below: Continued contributions to the care of household or family members. Enter the total average actual monthly expenses that you will continue to pay for the reasonable and necessary care and support of an elderly, chronically 40 ill, or disabled member of your household or member of your immediate family who is unable to pay for such expenses. Do not include payments listed in Line 34. 0.00 Protection against family violence. Enter the total average reasonably necessary monthly expenses that you actually incur to maintain the safety of your family under the Family Violence Prevention and Services Act or other 41 applicable federal law. The nature of these expenses is required to be kept confidential by the court. 0.00 Home energy costs. Enter the total average monthly amount, in excess of the allowance specified by IRS Local Standards for Housing and Utilities, that you actually expend for home energy costs. You must provide your case 42 trustee with documentation of your actual expenses, and you must demonstrate that the additional amount claimed is reasonable and necessary. 0.00 Education expenses for dependent children under 18. Enter the total average monthly expenses that you actually incur, not to exceed \$137.50 per child, for attendance at a private or public elementary or secondary 43 school by your dependent children less than 18 years of age. You must provide your case trustee with documentation of your actual expenses, and you must explain why the amount claimed is reasonable and necessary and not already accounted for in the IRS Standards. 275.00 Additional food and clothing expense. Enter the total average monthly amount by which your food and clothing expenses exceed the combined allowances for food and clothing (apparel and services) in the IRS National Standards, not to exceed 5% of those combined allowances. (This information is available at www.usdoj.gov/ust/ 44 or from the clerk of the bankruptcy court.) You must demonstrate that the additional amount claimed is reasonable and necessary. 50.00 Charitable contributions. Enter the amount reasonably necessary for you to expend each month on charitable 45 contributions in the form of cash or financial instruments to a charitable organization as defined in 26 U.S.C. § 170(c)(1)-(2). Do not include any amount in excess of 15% of your gross monthly income. 0.00 46 **Total Additional Expense Deductions under § 707(b).** Enter the total of Lines 39 through 45. 325.00

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			Subpart C: Deductions for De	bt 1	Payment			
47	own, check scheck case,	list the name of creditor, identic whether the payment includes duled as contractually due to each	s. For each of your debts that is secured fy the property securing the debt, state to taxes or insurance. The Average Month of Secured Creditor in the 60 months for additional entries on a separate page.	the A	Average Monthly ayment is the to ving the filing of	Payment, and tal of all amounts the bankruptcy		
		Name of Creditor	Property Securing the Debt		Average Monthly Payment	Does payment include taxes or insurance		
		U C 4 N 4 D	2008 Chevy Malibu. Location: 2305 Cashmere Way,	Φ.	-			
	a.	Huntington Natl Bk	Henderson NV 2305 Cashmere Way, Henderson, Nevada 89074	\$	520.00	■yes □no		
	b.	Wells Fargo Bank Nv Na	Single Family, 4 bedrooms, 3 bathroom, 2,783 sqft 2305 Cashmere Way,	\$	143.03	■yes □no		
		Wells Fargo Home Mtg	Henderson, Nevada 89074 Single Family, 4 bedrooms, 3 bathroom, 2,783 sqft	\$	2,639.83	■yes □no		
	c.	Wells Fargo Hollie Mitg	battiroom, 2,783 sqit	<u> </u>	otal: Add Lines	yes 🗀 iio	\$	3,302.86
48	moto your paym sums	r vehicle, or other property nec deduction 1/60th of any amoun tents listed in Line 47, in order in default that must be paid in bllowing chart. If necessary, list	If any of debts listed in Line 47 are seessary for your support or the support of the "cure amount") that you must pay to maintain possession of the property, order to avoid repossession or foreclosus additional entries on a separate page.	f you the The	or dependents, you creditor in addit cure amount wo	ou may include in ion to the uld include any		
	11	Name of Creditor	Property Securing the Debt		1/60th of t	the Cure Amount		
	a.	-NONE-				Total: Add Lines	\$	0.00
49	prior		claims. Enter the total amount, divided ny claims, for which you were liable at ch as those set out in Line 33.				\$	0.00
		oter 13 administrative expense ting administrative expense.	es. Multiply the amount in Line a by the	amo	ount in Line b, a	nd enter the		
50	a.	Projected average monthly (\$		0.00		
50	b.	issued by the Executive Offi	district as determined under schedules ice for United States Trustees. (This www.usdoj.gov/ust/ or from the clerk of	x		10.00		
	c.	Average monthly administra	ative expense of Chapter 13 case	To	otal: Multiply Li	nes a and b	\$	0.00
51	Tota	l Deductions for Debt Paymer	at. Enter the total of Lines 47 through 5	0.			\$	3,302.86
			Subpart D: Total Deductions f	ron	n Income			
52	Tota	l of all deductions from incom	e. Enter the total of Lines 38, 46, and 5	51.			\$	6,935.62
	_	Part V. DETERMI	INATION OF DISPOSABLE I	INC	COME UNDI	ER § 1325(b)(2)		
53	Tota	l current monthly income. En	ter the amount from Line 20.				\$	7,516.96
54	paym	nents for a dependent child, repo	vaverage of any child support payments orted in Part I, that you received in accourty to be expended for such child.				\$	0.00
55	wage		Enter the monthly total of (a) all amount retirement plans, as specified in § 541(lified in § 362(b)(19).				\$	0.00
	1	1 . 1					Ψ	0.00

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56	Total of all deductions allowed under § 707(b)(2).	6,935.62	
	Deduction for special circumstances. If there are special circumstances that justify additional expenses for which there is no reasonable alternative, describe the special circumstances and the resulting expenses in lines a-c below. If necessary, list additional entries on a separate page. Total the expenses and enter the total in Line 57. You must provide your case trustee with documentation of these expenses and you must provide a detailed explanation of the special circumstances that make such expense necessary and reasonable.		
57	Nature of special circumstances	Amount of Expense	
	a.	\$	
	b.	\$	
	c.	\$	
		Total: Add Lines \$	0.00
58	Total adjustments to determine disposable income. result.	Add the amounts on Lines 54, 55, 56, and 57 and enter the	6,935.62
59	Monthly Disposable Income Under § 1325(b)(2). S	Subtract Line 58 from Line 53 and enter the result.	581.34
		Ψ	
	D4 V/I A DDI	THOMAL EXPENSE OF AIMS	
	Other Expenses. List and describe any monthly expe of you and your family and that you contend should be	enses, not otherwise stated in this form, that are required for the heat on a additional deduction from your current monthly income under the son a separate page. All figures should reflect your average mon	r §
	Other Expenses. List and describe any monthly expe of you and your family and that you contend should b 707(b)(2)(A)(ii)(I). If necessary, list additional source each item. Total the expenses.	enses, not otherwise stated in this form, that are required for the heat be an additional deduction from your current monthly income under tees on a separate page. All figures should reflect your average mon	r §
60	Other Expenses. List and describe any monthly expe of you and your family and that you contend should b 707(b)(2)(A)(ii)(I). If necessary, list additional sourc each item. Total the expenses. Expense Description	enses, not otherwise stated in this form, that are required for the heater an additional deduction from your current monthly income under the ses on a separate page. All figures should reflect your average mon Monthly Amount	r §
60	Other Expenses. List and describe any monthly expe of you and your family and that you contend should b 707(b)(2)(A)(ii)(I). If necessary, list additional source each item. Total the expenses.	enses, not otherwise stated in this form, that are required for the heat be an additional deduction from your current monthly income under tees on a separate page. All figures should reflect your average mon	r §
60	Other Expenses. List and describe any monthly expe of you and your family and that you contend should b 707(b)(2)(A)(ii)(I). If necessary, list additional sourc each item. Total the expenses. Expense Description a.	enses, not otherwise stated in this form, that are required for the header an additional deduction from your current monthly income under the east on a separate page. All figures should reflect your average mon Monthly Amount \$ \$ \$ \$	r §
60	Other Expenses. List and describe any monthly expe of you and your family and that you contend should b 707(b)(2)(A)(ii)(I). If necessary, list additional sourc each item. Total the expenses. Expense Description a. b. c. d.	enses, not otherwise stated in this form, that are required for the header an additional deduction from your current monthly income under sees on a separate page. All figures should reflect your average mon Monthly Amount \$ \$ \$ \$ \$ \$	r §
60	Other Expenses. List and describe any monthly expe of you and your family and that you contend should b 707(b)(2)(A)(ii)(I). If necessary, list additional sourc each item. Total the expenses. Expense Description a. b. c. d.	enses, not otherwise stated in this form, that are required for the header an additional deduction from your current monthly income under the east on a separate page. All figures should reflect your average mon Monthly Amount \$ \$ \$ \$	r §
60	Other Expenses. List and describe any monthly expe of you and your family and that you contend should b 707(b)(2)(A)(ii)(I). If necessary, list additional source each item. Total the expenses. Expense Description a. b. c. d. Total:	enses, not otherwise stated in this form, that are required for the header an additional deduction from your current monthly income under sees on a separate page. All figures should reflect your average mon Monthly Amount \$ \$ \$ \$ \$ \$	r §
60	Other Expenses. List and describe any monthly expe of you and your family and that you contend should be 707(b)(2)(A)(ii)(I). If necessary, list additional source each item. Total the expenses. Expense Description a. b. c. d. Total:	enses, not otherwise stated in this form, that are required for the heade an additional deduction from your current monthly income under the son a separate page. All figures should reflect your average mon Monthly Amount \$ \$ \$ \$ Add Lines a, b, c and d \$	r § thly expense for
60	Other Expenses. List and describe any monthly expe of you and your family and that you contend should b 707(b)(2)(A)(ii)(I). If necessary, list additional source each item. Total the expenses. Expense Description a. b. c. d. Total:	enses, not otherwise stated in this form, that are required for the heade an additional deduction from your current monthly income under sees on a separate page. All figures should reflect your average mon Monthly Amount \$ \$ \$ \$ Add Lines a, b, c and d * To VII. VERIFICATION	r § thly expense for

Current Monthly Income Details for the Debtor

Debtor Income Details:

Income for the Period 02/01/2009 to 07/31/2009.

Line 2 - Gross wages, salary, tips, bonuses, overtime, commissions

Source of Income: Davis Managment

Income by Month:

02/2009	\$1,800.80
03/2009	\$5,101.84
04/2009	\$8,764.28
05/2009	\$5,036.48
06/2009	\$4,739.12
07/2009	\$5,045.00
Average per month:	\$5,081.25
	03/2009 04/2009 05/2009 06/2009 07/2009

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Current Monthly Income Details for the Debtor's Spouse

Spouse Income Details:

Income for the Period **02/01/2009** to **07/31/2009**.

Line 2 - Gross wages, salary, tips, bonuses, overtime, commissions

Source of Income: Albertsons

Income by Month:

6 Months Ago:	02/2009	\$2,108.07
5 Months Ago:	03/2009	\$1,771.23
4 Months Ago:	04/2009	\$2,510.92
3 Months Ago:	05/2009	\$2,776.80
2 Months Ago:	06/2009	\$2,723.62
Last Month:	07/2009	\$2,723.62
	Average per month:	\$2,435.71

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